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themselves, who went to Buckingham Palace, escorted by the matron of St. Dunstan's Hostel, wearing her nurse's uniform and the Order of the British Empire. They were received by Princess Mary, who was accompanied by Lord Lascelles, in the Throne Room. The Princess, who is very fair with a wealth of golden hair, has clear blue eyes which grew sad, in spite of her happiness, when she looked at these two men who had made such sacrifices for their King, her Royal father, and for their country. After shaking hands with them both, Her Royal Highness said, "The knowledge that the gifts were made by the donors renders them additionally acceptable, and in tendering them my warmest thanks, I assure them that I shall continue to take the greatest interest in the work of St. Dunstan's, and the welfare of its inmates."

The men were then escorted from the Throne Room and down the grand staircase of the palace by the soldiers on duty, with whom they exchanged many cheery words. Then back to St. Dunstan's to tell their comrades the story of the presentation of their gifts, and the sweet graciousness of Her Royal Highness, Princess Mary.

CONTROL OF VENEREAL DISEASES¹

BY P. H. BARTHOLOMEW, M.D.

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WHAT are the venereal diseases? They are gonorrhœa, syphilis, and chancroid.

Gonorrhœa is the most prevalent of any disease in this country except measles. Syphilis is our greatest killing disease. Steps have been provided by the nation to prevent these diseases. Each individual state has taken measures to endeavor to control venereal diseases. What methods are being utilized in the State of Nebraska? We have adopted the plan of treatment by medical measures, social and protective measures, education and recreation.

Gonorrhœa is caused by a specific germ called the gonococcus; it is always present in gonorrhœa. It should be examined by one who has had training in the recognition of the gonococcus. The same thing is true in regard to the cause of syphilis. It is always known by the presence of the chancre. It is typical but in many cases it is overlooked. Every sore of long standing should be examined carefully

¹ Read at the annual meeting, Nebraska State Nurses' Association, Lincoln, October 11 and 12, 1921.

for the presence or absence of the syphilitic germ. This applies to every sore of long standing irrespective of the location on the body, because syphilis affects every structure of the body. The same is true of no other disease. A nurse can be of great value to the public in helping to impart this information. The fact that these conditions have been overlooked in the past has been a big factor in the spreading of syphilis. We cannot be too careful to exclude syphilis in any chronic condition. In the secondary stage syphilis is usually manifested by skin eruptions; however, it is well to investigate and consider all skin eruptions because of the possibility of their being syphilitic. This applies to all individuals, rich and poor alike. Here is an example of a situation that comes up almost daily. A mother and grandmother came in to see me about treatment; the husband of the woman had been away from home and had contracted syphilis. When he came home he told his wife of his condition and she would not even kiss him; however, he kissed the baby and that was the means of transmitting syphilis to the whole family. It is said, "Don't emphasize the fact that we have innocent infections." Venereal diseases are usually transmitted through sexual relationship, but there are many innocent individuals. Some very reliable physicians say that about 10 per cent. of the population have syphilis.

In regard to gonorrhoea, it is so prevalent that it is a big factor with women. It is a big factor in the hospitals, where more than 60 per cent. of the abdominal operations are due to gonorrhoea. In a very large proportion of the cases the infections were innocently acquired. In the past many a young man contracted gonorrhoea because he was led to believe that he was not a man unless he had had gonorrhoea; he was told that a dose of gonorrhoea was no worse than a bad cold. It wasn't feared as it should be and as a result he was not adequately treated. Sooner or later he was married and the wife became infected. The same thing applies to syphilis.

Syphilis is the only disease that is transmitted from parent to offspring. This is not true of tuberculosis; that has been definitely demonstrated by experiments on lower animals. When only partially overcome, syphilis may remain latent in the system for many years and then spring up again. We have recurrences all too frequently.

What can the nurse do? Where can she help in these conditions? She can help through education, through social measures and recreation. All nurses should have social service training, which makes them more valuable in all their cases. There is a social service condition to be handled in every family, whether rich or poor. With especial reference to venereal diseases, it is essential that the individual doing the work should have social training. There are so

many different angles to the handling of the problem. You are all aware, no doubt, that venereal diseases have grown through false modesty and ignorance. Ignorance is no longer an excuse; literature is available now for everyone.

The nurse, like the physician, should be a teacher; it is her duty to teach; a distinct duty that is thrust upon her when she enters that profession. It is her duty to be well informed regarding venereal diseases. Many times she can get next to a family, obtain data, call the aid of a physician, and get the source of infection where a man would fall down repeatedly. But unless she has had training she will not be successful. The nurse to be most successful in venereal disease work has to develop certain qualities; she must be aggressive, she must possess initiative, and she must be well informed. In addition, she must possess tact, and most certainly, sympathy. Many conditions would wring the heart-strings of even a hard-hearted individual. Here is an instance that occurred just recently. A nine-year-old boy infected with gonorrhoea received it from his fourteen-year-old sister, and she from her sixteen-year-old uncle. A nurse worked this problem out; the condition has been corrected and the children placed in state institutions. These conditions exist. What will the nurse do if she has knowledge of them? The best thing she can do is to go to a physician or the local health officer for a complete investigation, as a protection to outsiders. And these investigations should preferably be carried on without publicity. More good comes from this manner of handling these cases. At times publicity is unavoidable; sometimes it is permissible to tell a white lie. It is a moral question in a sense.

Now a word about the Wasserman test. A physician had a chancre on his hand; he did not know where he could have gotten it. After going over the case carefully, he remembered that while treating a case of syphilis with mercury injections, his attention was called away, and he jabbed himself with the needle. It is possible to get syphilis in this manner. This man had a 4-plus Wasserman. This practically always means syphilis. A 1-plus or a 2-plus means a further investigation always. All Wasserman reactions should be verified because there is clinical evidence there. Go over the case again and verify it; it may be necessary to make a spinal fluid test.

The treatment of syphilis is certain; if you get the primary cause there is practically no question in regard to the cure. You can clear the condition up with one or two injections. There is nothing that responds so quickly. The need of continued treatment is very necessary and the nurse can help wonderfully in showing this condition to the others in the family. A primary case should be treated

for one year and be under observance for several years thereafter. A secondary case should be under treatment for four or five years. Those can almost invariably be cleared up showing no reaction, but the continued treatment is most essential. No one can tell how long it will take to clear up gonorrhoea. Occasionally we find the kidneys involved.

Locomotor ataxia is due to syphilis and syphilis alone. High mortality in our infants and the large percentage of miscarriages are due to syphilis. We lost 80,000 soldiers during the war; during the same period of time there were 156,000 deaths from tuberculosis, 180,000 deaths from cancer, and 243,000 deaths from syphilis. It is our greatest killing disease.

In the past there has been a great deal of carelessness and ignorance in the treatment of venereal disease. That has been changed and it is now on a higher plane. Quacks have been eliminated; they have not the hold that they had in the past, largely because of education. We need to talk about these matters openly and frankly in order to make real progress. Whenever the opportunity presents itself, the nurse should teach the duty of the parents to instruct their children. If the parent does not instruct the child he will get it from the gutter in a nasty way. Do not tell the children that the stork brought the baby, especially in the rural communities where the children are associated with animals. When the child asks questions give him an answer and tell him you will explain further when he is older.

“CARRY ON”

BY BERTHA ESTELLE MERRILL, R.N.

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IT is true a nurse may do efficient work for years without affiliating with the various nursing organizations. It is also true that she could make a better record for a longer period if she marched shoulder to shoulder with that band of earnest workers who are aiming to reach and maintain a standard of excellence worthy of their calling.

Probably in clubs and organizations everywhere the members could be classed under two groups—leaders and leaners; but because I am best acquainted with organizations related to our profession, it seems as though we have an unnecessarily long list in the “leaner” group. If you wish to know to which class you belong, ask yourself this question: “If every member put into the association the same amount of money, time and talent I do, what kind of an association